| ,   |  | PART B   | - FEE(S) TRA  | NSMITTAL  |  | _  |  |  |  |
|---|--|--|---|---|--|--|--|--|--|
| Complete and send th  | nis form, together wit   | h applicable fo  | ee(s), to: <u>Mail</u><br>or <u>Fax</u>   | Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 (703) 746-4000 |  |  |  |  |  |
| INSTRUCTIONS: This for appropriate. All further corn indicated unless corrected by maintenance fee notification             | elow or directed otherwise   | smitting the ISSU<br>Patent, advance or<br>in Block 1, by (a | E FEE and PUBLIC  | CATION FEE (if req  | uired). Blocks 1 through 5 s<br>will be mailed to the current<br>s; and/or (b) indicating a sep  | hould be completed where<br>correspondence address as<br>arate "FEE ADDRESS" for                                     |  |  |  |
| CURRENT CORRESPONDENCE 24510 75   | E ADDRESS (Note: Use Block 1 for<br>90 05/31/2005<br>DNICK GRAY CAR<br>GROUP<br>H STREET, NW   | 0  | JUN 2 9 m   | papers. Each addition have its own certification  | f mailing can only be used f<br>his certificate cannot be used<br>hal paper, such as an assignment<br>te of mailing or transmission.<br>ertificate of Mailing or Transthis Fee(s) Transmittal is being<br>with sufficient postage for final<br>li Stop ISSUE FEE address<br>PTO (703) 746-4000, on the | smission  g deposited with the United st class mail in an envelope s above, or being facsimile date indicated below. |  |  |  |
| 06/30/2005 SMINASS2 00  | 000021 501442 09007  | 306  |   |   |  | (Depositor's name)   |  |  |  |
| 01 FC:1501 1320.  | 00 DA 80.00 OP   |  |   | <u> </u>  |  | (Signature)  |  |  |  |
| 71 1011001 10200  | •• •• • • • • • • • • • • • • • • • •  |  |   | L   |  | (Date)   |  |  |  |
| APPLICATION NO.   | FILING DATE  |  | FIRST NAMED INVEN   | TOR   | ATTORNEY DOCKET NO.  | CONFIRMATION NO.   |  |  |  |
| 09/007,306<br>FITLE OF INVENTION: NO  | 01/15/1998<br>OVEL GUANOSINE MON   |  | JENNIFER L. HILLN<br>EDUCTASE   | MAN   | PF-0182-1  | 4741   |  |  |  |
| APPLN. TYPE   | SMALL ENTITY   | ISSUE F  | EE PU   | BLICATION FEE   | TOTAL FEE(S) DUE   | DATE DUE   |  |  |  |
| nonprovisional  | NO   | \$80   |   | \$0   | \$80   | 08/31/2005   |  |  |  |
| EXAM  | INER   | ART UN   | IT CI   | ASS-SUBCLA SS   | ገ  |  |  |  |  |
| NASHED, N   | ASHAAT T   | 1652   |   | 424-094400  | _  |  |  |  |  |
| CFR 1.363).  Change of correspond Address form PTO/SB/12  "Fee Address" indicate PTO/SB/47; Rev 03-02 o Number is required. | e address or indication of "Forence address (or Change of (2) attached.  ion (or "Fee Address" Indication (or "Fee Address" Indicati | Correspondence   | 2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. |   |  |  |  |  |  |
|   | RESIDENCE DATA TO B  |  |   |   | -  |  |  |  |  |
| PLEASE NOTE: Unless recordation as set forth in   | an assignee is identified be 37 CFR 3.11. Completion   | elow, no assignee of this form is NO                         | data will appear on t   | he patent. If an assig<br>g an assignment.  | nee is identified below, the   | locument has been filed for  |  |  |  |
| (A) NAME OF ASSIGNE   | EE   | (B   | ) RESIDENCE: (CIT   | Y and STATE OR CO   | OUNTRY)  |  |  |  |  |
| Incyte (  | Corporation  |  | Wi  | lmington, DE  | :  |  |  |  |  |
| -   | assignee category or catego  |  |   | Individual XX   | Corporation or other private gr  | oup entity Government  |  |  |  |
| la. The following fee(s) are o  | enclosed:  | 40   | o. Payment of Fee(s):   | nount of the fee(s) is e  | malagad  |  |  |  |  |
|   | mall entity discount permitte  | od)  |   |   |  |  |  |  |  |
| Advance Order - # of  |  |  | Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50 1442 (enclose an extra copy of this form).   |   |  |  |  |  |  |
|   | (from status indicated above   |  |   | JU 1442   | ALL ENTITY status. See 37 C  | <u> </u>   |  |  |  |
| The Director of the USPTO i   |  | e Fee and Publicate  | tion Fee (if any) or to   |   | sly paid issue fee to the applic<br>gistered attorney or agent; or t   |  |  |  |  |

Authorized Signature

Typed or printed name

James M. Herntz

Registration No. 41,828

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPE Chrocess) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preaning, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Complete Complete this formation. Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Parallel Virginia 22313-1450.

Under the Panerwork Reduction Act of 1995, po percent and the panerwork Reduction Act of 1995, po percent and the panerwork Reduction Act of 1995, po percent and the panerwork Reduction Act of 1995, po percent and the panerwork Reduction Act of 1995, po percent and the panerwork Reduction Act of 1995, po percent and the panerwork Reduction Act of 1995, po percent and the panerwork Reduction Act of 1995, po percent and the panerwork Reduction Act of 1995, po percent and the panerwork Reduction Act of 1995, population and the panerwork Red

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

6/29/05

## DLA PIPER RUDNICK GRAY CARY US LLP

WASHINGTON, DC 20036-2412 TELEPHONE: 202-861-3900 FACSIMILE: 202-223-2085

DOCKET NO.: 9561-018-27 DIV

ASSISTANT COMMISSIONER FOR PATENTS PO BOX 1450 ALEXANDRIA, VA 22313-1450

Re: Serial No.: 09/007,306

Applicant(s): Jennifer L. HILLMAN

Filing Date: January 15, 1998

For: NOVEL GUANOSINE MONOPHOSPHATE REDUCTASE

Group Art Unit: 1652

Examiner: Nashaat T. Nashed

SIR:

Attached hereto for filing are the following papers:

Fee Transmittal
Issue Fee Transmittal

Our check in the amount of \$80.00 is attached covering any required fees. In the event any variance exists between the amount enclosed and the Patent Office charges for filing the above-noted documents, including any fees required under 37 C.F.R. 1.136 for any necessary extension of time to make the filing of the attached documents timely, please charge or credit the difference to Deposit Account No. 50-1442. Further, if these papers are not considered timely filed, then a request is hereby made under 37 C.F.R. 1.136 for the necessary extension of time. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

DLA PIPER RUDNICK GRAY CARY US LLP

James M. Heintz

Registration No.: 41,828

## JUN 2 9 2005

## FEE TRANSMITTAL FY 2005

 Docket No.
 9561-018-27 DIV

 Serial No.
 09/007,306

 Filing Date
 January 15, 1998

 Inventor(s)
 Jennifer L. HILLMAN

 Group Art Unit
 1652

| TOTAL AMOUNT OF PAYMENT   |   |      |        |        | \$8      | 0.00                     |                       | Exa                         | xaminer Nashaat T. Nas |             |                 | . Nashed                             |                              |                     |             |                        |       |
|---|---|------|--------|--------|----------|--------------------------|-----------------------|-----------------------------|------------------------|-------------|-----------------|--------------------------------------|------------------------------|---------------------|-------------|------------------------|-------|
| 1. □ Applicant claims small entity status.                        |   |      |        |        |          |                          | T                     | FEE CALCULATION (continued) |                        |             |                 |                                      |                              |                     |             |                        |       |
| ■ Charge any <u>UNDERPAYMENT</u> or credit any <u>OVERPAYMENT</u> |   |      |        |        |          |                          | -                     | 3. ADDITIONAL FEES          |                        |             |                 |                                      |                              |                     |             |                        |       |
| in the indicated fees to Deposit Account No. 50-1442.             |   |      |        |        |          |                          | Ľ                     |                             |                        |             |                 |                                      |                              |                     |             |                        |       |
| □ Charge the indicated fees to Deposit Account No. 50-1442.       |   |      |        |        |          |                          |                       | Large Entity Small Entity   |                        |             | Fee Description |                                      |                              |                     |             |                        |       |
| 2. Check enclosed.  |   |      |        |        |          |                          |                       | Fee<br>Code                 | Fee<br>(\$)            | Fee<br>Code | Fee<br>(\$)     |                                      | Fee Paid                     |                     |             |                        |       |
| FEE CALCULATION   |   |      |        |        |          |                          | 1                     | 1051                        | 130                    | 2051        | 65              | Surcharge-late filing fee<br>or oath |                              |                     |             |                        |       |
| 1. B  | 1. BASIC FILING FEE   |      |        |        |          |                          |                       | 1                           | 1053                   | 130         | 1053            | 130                                  | Non-English<br>Specification |                     |             |                        |       |
| Large   | Entity  | Sr   | nall E | Entity | T        | Fee Desc                 | ription               |                             |                        |             | $\top$          | 1251                                 | 120                          | 2251                | 60          | 1-mo. ext. of time     | -     |
| Code  | Fee \$  | Code |        | Fee \$ | Ť        |                          |                       |                             |                        | Fee Paid    |                 | 1252                                 | 450                          | 2252                | 225         | 2-mo. ext. of time     |       |
| 1011  | 300   | 2011 | 1      | 150    | Ī        | Utility Fling Fee        |                       |                             | T                      |             |                 | 1253                                 | 1020                         | 2253                | 510         | 3-mo. ext. of time     |       |
| 1012  | 200   | 2012 |        | 100    | T        | Design Filing Fee        |                       |                             | $\top$                 |             |                 | 1254                                 | 1590                         | 2254                | 795         | 4-mo. ext. of time     |       |
| 1013  | 200   | 2013 |        | 100    |          | Plant Filir              | lant Filing Fee       |                             |                        |             |                 | 1255                                 | 2160                         | 2255                | 1080        | 5-mo. ext. of time     |       |
| 1014  | 300   | 2014 |        | 150    |          | Reissue F                | eissue Filing Fee     |                             |                        |             |                 | 1401                                 | 500                          | 2401                | 250         | Notice of Appeal       |       |
| 1005  | 200   | 2005 |        | 100    |          | Provision                | rovisional Filing Fee |                             |                        |             |                 | 1402                                 | 500                          | 2402                | 250         | Appeal Brief           |       |
| 1111  | 500   | 2111 |        | 250    |          | Utility Search Fees      |                       |                             |                        |             |                 | 1403                                 | 1000                         | 2403                | 500         | Request for Oral       |       |
| 1311  | 200   | 2311 |        | 100    |          | Utility Examination Fees |                       |                             |                        |             |                 | 1501                                 | 1400                         | 2501                | 700         | Utility/Reissue Issue  | 80.00 |
|   | SUBTOTAL \$0.00   |      |        |        |          |                          | 0                     | 1504                        | 300                    | 1504        | 300             | Publication Fee                      |                              |                     |             |                        |       |
| 2. E  | 2. EXTRA CLAIM FEES   |      |        |        |          |                          |                       |                             | 8001                   | 3           | 8001            | 3                                    | Advance Copy of Patent       |                     |             |                        |       |
| tot. cla  | ims   |      | T.     | - 20*  | T        | = 0                      | x                     | \$50                        | =                      |             | 0               | 1806                                 | 180                          | 1806                | 180         | IDS Submission         |       |
| ind. cla  | aims  |      | Τ.     | - 3*   |          | = 0                      | ×                     | \$200                       | =                      |             | 0               | 8021                                 | 40                           | 8021                | 40          | Assignment Recordation |       |
| □ Multiple Dependent Claims \$360 =                               |   |      |        |        |          |                          | 1801                  | 790                         | 2801                   | 395         | For Filing RCE  |                                      |                              |                     |             |                        |       |
| SUBTOTAL  |   |      |        |        |          |                          |                       |                             | <u> </u>               | 1814        | 130             | 2814                                 | 65                           | Terminal Disclaimer | <del></del> |                        |       |
| 3. APPLICATION SIZE FEES  |   |      |        |        |          |                          |                       | Other:                      |                        |             |                 |                                      |                              |                     |             |                        |       |
| Total # of Sheets # of Extra Sheets                               |   |      |        |        |          |                          |                       |                             |                        |             |                 |                                      |                              |                     |             |                        |       |
| - 100 = 0   |   |      |        |        | <u>-</u> | 1                        |                       |                             | -                      |             |                 |                                      |                              |                     |             |                        |       |
| 50<br>frac  | # of each additional 50 sheets or fraction thereof (round up) Fee |      |        |        |          | Total Fee Due            |                       |                             |                        |             | SUBTOTAL        |                                      |                              |                     |             | 80                     |       |
|   |   |      | х      | \$250  |          | =                        |                       |                             | <br>o                  | *           |                 |                                      |                              |                     |             |                        |       |

| Name      | James M. Heintz | Registration No. 41,828 |                  |           |              |  |
|-----------|-----------------|-------------------------|------------------|-----------|--------------|--|
| Signature | Ambo de to      | Date                    | 6129105          | Telephone | 202-861-3900 |  |
| Name      |                 |                         | Registration No. |           |              |  |